ROUTING AND TRANSMITTAL SLIP

Date 7/2/85

TO: (Name, office symbol, room number, building, Agency/Post)	Initials	Date
1. C/PMS/OL		
2. C/PD/OL		
3. C/IMSS/OL - Return to		
4.		
5.		

☐	Action	☐	File	☐	Note and Return
☐	Approval	☐	For Clearance	☐	Per Conversation
☐	As Requested	☐	For Correction	☐	Prepare Reply
☐	Circulate	☐	For Your Information	☐	See Me
☐	Comment	☐	Investigate	☐	Signature
☐	Coordination	☐	Justify	☐	

REMARKS

1 and 2: I thought you might like to scan the attached "Oversight of the Grace Commission's Procurement Recommendations."

Pls return for filing in IMSS.

DO NOT use this form as a RECORD of approvals, concurrences, disposals, clearances, and similar actions

STAT

FROM: (Name, org. symbol, Agency/Post)	Room No.—Bldg.
[redacted] OL/IMSS	2F31
	Phone No. [redacted]

STAT

5041-102

OPTIONAL FORM 41 (Rev. 7-76)
Prescribed by GSA
FPMR (41 CFR) 101-11.206

☆ GPO: 1983 O - 381-529 (132)

Approved For Release 2005/08/02 : CIA-RDP87-01146R000100010003-9

E/L

CENTRAL INTELLIGENCE AGENCY

Office of Legislative Liaison
Washington, D. C. 20505
Telephone: 351-6121

TO: Director of Logistics

DD/L 2 [redacted] STAT

D/L [redacted] STAT 1155

The attached transcript of hearing on Government procurement reform for your info.

[redacted] STA

/ OLL

STAT [redacted]

FORM 3-79 **1533** OBSOLETE PREVIOUS EDITIONS. (40)